

STATEMENT OF ECONOMIC INTERESTS  
COVER PAGE

Date Received  
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San Jose City Clerk  
E-Filed on: 2011 MAR 32 A 9:45

ID - 28101911 87200

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)

Oliverio, Pierluigi

1. Office, Agency, or Court

Agency Name

city of san jose

Division, Board, Department, District, if applicable

Your Position

district 6

councilperson

► If filing for multiple positions, list below or on an attachment.

Agency: City of San Jose

Position: Councilperson

2. Jurisdiction of Office (Check at least one box)

☐ State

☐ Judge (Statewide Jurisdiction)

☐ Multi-County

☒ County of Santa Clara

☒ City of san jose

☐ Other

3. Type of Statement (Check at least one box)

☒ Annual: The period covered is January 1, 2010, through December 31, 2010.

-or-

The period covered is \_\_\_\_\_, through December 31, 2010.

☐ Assuming Office: Date \_\_\_\_\_

☐ Leaving Office: Date Left \_\_\_\_\_  
(Check one)

☐ The period covered is January 1, 2010, through the date of leaving office.

☐ The period covered is \_\_\_\_\_, through the date of leaving office.

☐ Candidate: Election Year \_\_\_\_\_ Office sought, if different than Part 1: \_\_\_\_\_

4. Schedule Summary

Check applicable schedules or "None."

► Total number of pages including this cover page: 5

☒ Schedule A-1 - Investments - schedule attached

☒ Schedule C - Income, Loans, & Business Positions - schedule attached

☐ Schedule A-2 - Investments - schedule attached

☒ Schedule D - Income - Gifts - schedule attached

☐ Schedule B - Real Property - schedule attached

☐ Schedule E - Income - Gifts - Travel Payments - schedule attached

-or-

☐ None - No reportable interests on any schedule

I certify under penalty of perjury under the laws of the State of California that

Date Signed 03/09/2011  
(month, day, year)

Signature

# DRAFT

## SCHEDULE A-1 Investments

### Stocks, Bonds, and Other Interests

(Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

<b>CALIFORNIA FORM 700</b>
FAIR POLITICAL PRACTICES COMMISSION
Name: <u>Oliverio, Pierluigi</u>

► NAME OF BUSINESS ENTITY  
Oracle

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
software

FAIR MARKET VALUE  
☒ \$2,000 - \$10,000      ☐ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000      ☐ Over \$1,000,000

NATURE OF INVESTMENT  
☒ Stock      ☐ Other \_\_\_\_\_  
(Describe)  
☐ Partnership    ☐ Income Received of \$0 - \$499  
                          ☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
 ACQUIRED                      DISPOSED

► NAME OF BUSINESS ENTITY  
Altera

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
semiconductors

FAIR MARKET VALUE  
☒ \$2,000 - \$10,000      ☐ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000      ☐ Over \$1,000,000

NATURE OF INVESTMENT  
☒ Stock      ☐ Other \_\_\_\_\_  
(Describe)  
☐ Partnership    ☐ Income Received of \$0 - \$499  
                          ☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
 ACQUIRED                      DISPOSED

► NAME OF BUSINESS ENTITY  
applied materials

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
semi capital equipment

FAIR MARKET VALUE  
☒ \$2,000 - \$10,000      ☐ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000      ☐ Over \$1,000,000

NATURE OF INVESTMENT  
☒ Stock      ☐ Other \_\_\_\_\_  
(Describe)  
☐ Partnership    ☐ Income Received of \$0 - \$499  
                          ☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
 ACQUIRED                      DISPOSED

► NAME OF BUSINESS ENTITY  
microsoft

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
software

FAIR MARKET VALUE  
☒ \$2,000 - \$10,000      ☐ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000      ☐ Over \$1,000,000

NATURE OF INVESTMENT  
☒ Stock      ☐ Other \_\_\_\_\_  
(Describe)  
☐ Partnership    ☐ Income Received of \$0 - \$499  
                          ☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
 ACQUIRED                      DISPOSED

► NAME OF BUSINESS ENTITY  
Cisco

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
networking equipment

FAIR MARKET VALUE  
☒ \$2,000 - \$10,000      ☐ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000      ☐ Over \$1,000,000

NATURE OF INVESTMENT  
☒ Stock      ☐ Other \_\_\_\_\_  
(Describe)  
☐ Partnership    ☐ Income Received of \$0 - \$499  
                          ☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
01/01/80      01/01/80  
 ACQUIRED                      DISPOSED

► NAME OF BUSINESS ENTITY  
analog devices

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
semiconductors

FAIR MARKET VALUE  
☒ \$2,000 - \$10,000      ☐ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000      ☐ Over \$1,000,000

NATURE OF INVESTMENT  
☒ Stock      ☐ Other \_\_\_\_\_  
(Describe)  
☐ Partnership    ☐ Income Received of \$0 - \$499  
                          ☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
 ACQUIRED                      DISPOSED

Comments: \_\_\_\_\_

**SCHEDULE A-1**  
**Investments**

**Stocks, Bonds, and Other Interests**  
(Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

**CALIFORNIA FORM 700**  
FAIR POLITICAL PRACTICES COMMISSION

Name

Oliverio, Pierluigi

► NAME OF BUSINESS ENTITY

FedEx

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

logistics

FAIR MARKET VALUE

- ☒ \$2,000 - \$10,000      ☐ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000      ☐ Over \$1,000,000

NATURE OF INVESTMENT

- ☒ Stock      ☐ Other \_\_\_\_\_  
(Describe)  
☐ Partnership      ☐ Income Received of \$0 - \$499  
                                 ☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:

\_\_\_\_/\_\_\_\_/\_\_\_\_      \_\_\_\_/\_\_\_\_/\_\_\_\_  
ACQUIRED      DISPOSED

► NAME OF BUSINESS ENTITY

Intel

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

semiconductors

FAIR MARKET VALUE

- ☒ \$2,000 - \$10,000      ☐ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000      ☐ Over \$1,000,000

NATURE OF INVESTMENT

- ☒ Stock      ☐ Other \_\_\_\_\_  
(Describe)  
☐ Partnership      ☐ Income Received of \$0 - \$499  
                                 ☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:

01/01/80      01/01/80  
ACQUIRED      DISPOSED

► NAME OF BUSINESS ENTITY

Texas Instruments

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

semiconductors

FAIR MARKET VALUE

- ☒ \$2,000 - \$10,000      ☐ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000      ☐ Over \$1,000,000

NATURE OF INVESTMENT

- ☒ Stock      ☐ Other \_\_\_\_\_  
(Describe)  
☐ Partnership      ☐ Income Received of \$0 - \$499  
                                 ☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:

\_\_\_\_/\_\_\_\_/\_\_\_\_      \_\_\_\_/\_\_\_\_/\_\_\_\_  
ACQUIRED      DISPOSED

► NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

FAIR MARKET VALUE

- ☐ \$2,000 - \$10,000      ☐ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000      ☐ Over \$1,000,000

NATURE OF INVESTMENT

- ☐ Stock      ☐ Other \_\_\_\_\_  
(Describe)  
☐ Partnership      ☐ Income Received of \$0 - \$499  
                                 ☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:

\_\_\_\_/\_\_\_\_/\_\_\_\_      \_\_\_\_/\_\_\_\_/\_\_\_\_  
ACQUIRED      DISPOSED

► NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

FAIR MARKET VALUE

- ☐ \$2,000 - \$10,000      ☐ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000      ☐ Over \$1,000,000

NATURE OF INVESTMENT

- ☐ Stock      ☐ Other \_\_\_\_\_  
(Describe)  
☐ Partnership      ☐ Income Received of \$0 - \$499  
                                 ☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:

\_\_\_\_/\_\_\_\_/\_\_\_\_      \_\_\_\_/\_\_\_\_/\_\_\_\_  
ACQUIRED      DISPOSED

► NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

FAIR MARKET VALUE

- ☐ \$2,000 - \$10,000      ☐ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000      ☐ Over \$1,000,000

NATURE OF INVESTMENT

- ☐ Stock      ☐ Other \_\_\_\_\_  
(Describe)  
☐ Partnership      ☐ Income Received of \$0 - \$499  
                                 ☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:

\_\_\_\_/\_\_\_\_/\_\_\_\_      \_\_\_\_/\_\_\_\_/\_\_\_\_  
ACQUIRED      DISPOSED

Comments: \_\_\_\_\_

**SCHEDULE C**  
**Income, Loans, & Business**  
**Positions**  
(Other than Gifts and Travel Payments)

**CALIFORNIA FORM 700**  
FAIR POLITICAL PRACTICES COMMISSION

Name \_\_\_\_\_  
Oliverio, Pierluigi

► **1. INCOME RECEIVED**

NAME OF SOURCE OF INCOME

Arena Solutions

ADDRESS (Business Address Acceptable)  
4100 East Third Ave  
Foster City CA 94404

BUSINESS ACTIVITY, IF ANY, OF SOURCE

PLM Solution Provider

YOUR BUSINESS POSITION

consultant

GROSS INCOME RECEIVED

- ☐ \$500 - \$1,000      ☐ \$1,001 - \$10,000  
☒ \$10,001 - \$100,000      ☐ OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED

☒ Salary      ☐ Spouse's or registered domestic partner's income

☐ Loan repayment      ☐ Partnership

☐ Sale of \_\_\_\_\_  
(Property, car, boat, etc.)

☐ Commission or      ☐ Rental Income, list each source of \$10,000 or more

☐ Other \_\_\_\_\_  
(Describe)

► **1. INCOME RECEIVED**

NAME OF SOURCE OF INCOME

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

YOUR BUSINESS POSITION

GROSS INCOME RECEIVED

- ☐ \$500 - \$1,000      ☐ \$1,001 - \$10,000  
☐ \$10,001 - \$100,000      ☐ OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED

☐ Salary      ☐ Spouse's or registered domestic partner's income

☐ Loan repayment      ☐ Partnership

☐ Sale of \_\_\_\_\_  
(Property, car, boat, etc.)

☐ Commission or      ☐ Rental Income, list each source of \$10,000 or more

☐ Other \_\_\_\_\_  
(Describe)

► **2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD**

\* You are not required to report loans from commercial lending institutions, or any indebtedness created as part of a retail installment or credit card transaction, made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER\*

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF LENDER

HIGHEST BALANCE DURING REPORTING PERIOD

- ☐ \$500 - \$1,000  
☐ \$1,001 - \$10,000  
☐ \$10,001 - \$100,000  
☐ OVER \$100,000

INTEREST RATE

\_\_\_\_\_ %      ☐ None

TERM (Months/Years)

SECURITY FOR LOAN

☐ None      ☐ Personal residence

☐ Real Property \_\_\_\_\_  
Street address

\_\_\_\_\_ City

☐ Guarantor \_\_\_\_\_

☐ Other \_\_\_\_\_  
(Describe)

Comments: \_\_\_\_\_

# DRAFT

## SCHEDULE D Income – Gifts

**CALIFORNIA FORM 700**  
FAIR POLITICAL PRACTICES COMMISSION

Name \_\_\_\_\_  
Oliverio, Pierluigi

► NAME OF SOURCE  
Cirque de Soleil  
ADDRESS (Business Address Acceptable)  
8400, 2E Avenue  
Montreal QC 146  
BUSINESS ACTIVITY, IF ANY, OF SOURCE \_\_\_\_\_

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>05/17/09</u>	<u>\$ 100.00</u>	<u>Ticket to show for my Dad</u>
<u>  /  /  </u>	<u>\$ _____</u>	<u> </u>
<u>  /  /  </u>	<u>\$ _____</u>	<u> </u>

► NAME OF SOURCE \_\_\_\_\_  
ADDRESS (Business Address Acceptable) \_\_\_\_\_  
BUSINESS ACTIVITY, IF ANY, OF SOURCE \_\_\_\_\_

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>  /  /  </u>	<u>\$ _____</u>	<u> </u>
<u>  /  /  </u>	<u>\$ _____</u>	<u> </u>
<u>  /  /  </u>	<u>\$ _____</u>	<u> </u>

► NAME OF SOURCE \_\_\_\_\_  
ADDRESS (Business Address Acceptable) \_\_\_\_\_  
BUSINESS ACTIVITY, IF ANY, OF SOURCE \_\_\_\_\_

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>  /  /  </u>	<u>\$ _____</u>	<u> </u>
<u>  /  /  </u>	<u>\$ _____</u>	<u> </u>
<u>  /  /  </u>	<u>\$ _____</u>	<u> </u>

► NAME OF SOURCE \_\_\_\_\_  
ADDRESS (Business Address Acceptable) \_\_\_\_\_  
BUSINESS ACTIVITY, IF ANY, OF SOURCE \_\_\_\_\_

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>  /  /  </u>	<u>\$ _____</u>	<u> </u>
<u>  /  /  </u>	<u>\$ _____</u>	<u> </u>
<u>  /  /  </u>	<u>\$ _____</u>	<u> </u>

► NAME OF SOURCE \_\_\_\_\_  
ADDRESS (Business Address Acceptable) \_\_\_\_\_  
BUSINESS ACTIVITY, IF ANY, OF SOURCE \_\_\_\_\_

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>  /  /  </u>	<u>\$ _____</u>	<u> </u>
<u>  /  /  </u>	<u>\$ _____</u>	<u> </u>
<u>  /  /  </u>	<u>\$ _____</u>	<u> </u>

► NAME OF SOURCE \_\_\_\_\_  
ADDRESS (Business Address Acceptable) \_\_\_\_\_  
BUSINESS ACTIVITY, IF ANY, OF SOURCE \_\_\_\_\_

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>  /  /  </u>	<u>\$ _____</u>	<u> </u>
<u>  /  /  </u>	<u>\$ _____</u>	<u> </u>
<u>  /  /  </u>	<u>\$ _____</u>	<u> </u>

Comments: \_\_\_\_\_  
\_\_\_\_\_



## CITY OF SAN JOSÉ, CALIFORNIA

Office of the City Clerk  
200 East Santa Clara Street, Wing  
San José, California 95113  
Telephone 1 (408) 535-1261  
FAX 1 (408) 292-6207

RECEIVED  
San José City Clerk

2011 MAR 29 P 3:30

### FAMILY GIFT REPORTING FORM

Pursuant to the City's Gift Ordinance, Chapter 12.08 of the San Jose Municipal Code, all consultants, contract employees, officers and designated employees of the City and its Redevelopment Agency must file this form with the City or Agency, together with the annual Statement of Economic Interests (Form 700).

You must list below any reportable gifts known to have been accepted by your domestic partner, spouse and any dependent child (Section 12.08.050) during the previous calendar year. Gifts that must be reported are those that would be prohibited had they been given to you. Refer to Section 12.08.010 and 12.08.020 to determine whether a particular gift must be reported. Section 12.08.030 lists the gifts that are not prohibited and do not need to be reported.

PLEASE TYPE OR PRINT IN INK

Name of Filer

PIERLUIGI OLIVERIO

Phone

(d)(5)

Name of Agency

CITY OF SAN JOSE

### CHECK APPROPRIATE ITEM

- ☒ I do not have a spouse, domestic partner or any dependent children.
- ☐ I have no knowledge that my spouse, domestic partner or any dependent child has received a reportable gift.
- ☐ My spouse, domestic partner or dependent children have, to my knowledge, received the following gifts:

### PLEASE LIST EACH GIFT SEPARATELY

DATE	RECIPIENT (Spouse/Domestic Partner/Child)	GIFT	DONOR	VALUE

### VERIFICATION

I have used all reasonable diligence in preparing this form, and to the best of my knowledge the information contained herein is true and complete.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on

3-25-11

(Date)

at

SAN JOSE, CA

(City, State)

(d)(5)

(Signature)